

110 E. 59TH STREET, FLOOR 23 NEW YORK, NY 10022 TEL: (212) 566-1000

September 13, 2024

VIA ECF

Honorable John P. Cronan United States District Judge -SDNY 500 Pearl St. New York, NY 10007-1312

Re: *United States v. Bhupinder Singh Virk*Ind. # 22 Cr. 618 (JPC)

Dear Judge Cronan:

I have represented Mr. Virk in connection with his pending Indictment before Your Honor. Mr. Virk was sentenced on July 18, 2024. Shortly thereafter, I filed a Notice of Appeal on Mr. Virk's behalf. Mr. Virk has expressed to me that his appeal will partly address the level of my representation. Mr. Virk has also expressed to me that he has no ability to continue to retain counsel. To that end, I am attaching his "Affirmation for Permission to Appeal in forma Pauperis". Should Your Honor grant his permission, I intend to seek withdrawal as counsel with the Second Circuit.

Thank you for your consideration.

Very Truly Yours,

SULLIVAN BRILL, LLP

By: Steven Brill

The instant request is granted. Mr. Virk is hereby granted leave to appeal *in forma pauperis*.

SO ORDERED.

Date: September 13, 2024 New York, New York

JOHN P. CRONAN
United States District Judge

UNITED STATES DISTRICT COURT

	DISTRICT OF	
united States of, America Plaintiff v. Bhapinder urk, Defendant))))))	Case No. <u>22. Cr.</u> 618 (JPC)
	,	

AFFIDAVIT ACCOMPANYING MOTION FOR PERMISSION TO APPEAL IN FORMA PAUPERIS

Affidavit in Support of Motion

I swear or affirm under penalty of perjury that, because of my poverty, I cannot prepay the docket fees of my appeal or post a bond for them. I believe I am entitled to redress. I swear or affirm under penalty of perjury under United States laws that my answers on this form are true and correct. (28 U.S.C. § 1746; 18 U.S.C. § 1621.)

Instructions

Complete all questions in this application and then sign it. Do not leave any blanks: if the answer to a question is "0," "none," or "not applicable (N/A)," write that response. If you need more space to answer a question or to explain your answer, attach a separate sheet of paper identified with your name, your case's docket number, and the question number.

Signed: Date: 8/20/2024

My issues on appeal are: My Lewyer and lasted to bring translator because of my language barrier and he didn't and made promises which were lies and told me my deal was a good deal and misguided me and did not assist me like how he should have ineffective of the following sources during the past 12 months. Adjust any amount that was received weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate. Use

gross amounts, that is, amounts before any deductions for taxes or otherwise.

Rev. 12.1.2018

Income source	Average monthly amount during the past 12 months			Amount expected next month			
	You	Spou	se	You		Spou	se
Employment	\$ 6	\$	$\Phi_{\underline{}}$	\$ ()	\$ (<u></u>
Self-employment	\$ 0	\$	معمد دوره والتاري مول	\$:		\$	and the second s
Income from real property (such as rental income)	s	\$	To the second se	\$		\$	A THE CONTRACT OF THE CONTRACT
Interest and dividends	\$ C	\$		\$		\$	And the state of t
Gifts	\$ () \$	A Parket State of the State of	\$	SEAL OF SEAL O	\$	Para Para Para Para Para Para Para Para
Alimony	\$ () \$	e de la company de la comp	\$	Libert and the second	\$	- Care Control
Child support	\$ () \$	CLIAN PROPER TAME	\$	A Linear	\$	CC Professional Co.
Retirement (such as social security, pensions, annuities, insurance)	\$ (\$	Al-Aveletic Al-Ave	\$	A Long and	\$	A CONTRACTOR OF THE PARTY OF TH
Disability (such as social security, insurance payments)	\$ (s	Alanturanajani, eta eti emineti	\$	Afficiant Linguistativi Audionary (challenges)	\$	N SAUGANTANIANTANIANTANIAN
Unemployment payments	\$ (O \$	PROCESSION PORTS	\$		\$	AND THE PERSON NAMED IN COLUMN
Public-assistance (such as welfare)	\$	0 \$	A. Garage Constitution of the Constitution of	\$		\$	A STATE OF THE STA
Other (specify):	\$	O \$	The state of the s	\$	a Legistra de Manuel Al Landing quan Legistra	\$	D-FR-DANGEN-MATERIA GAN (FREE
Total monthly income:	\$	ð s	U	\$	T. Marine	\$	V

2. List your employment history for the past two years, most recent employer first. (Gross monthly pay is before taxes or other deductions.) Year in jail 21 months.

Address	Dates of employment	Gross monthly pay
		\$ \
		\$
		\$
	Address	Address

3. List your spouse's employment history for the past two years, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of employment	Gross monthly pay		
			\$ 0		
			\$ المواقعة والمواقعة والمواقع والمواقعة والمواقعة والمواقعة والمواقعة والمواقعة والمواقع		
			\$ V		

4. How much cash do you and your spouse have? \$______

Below, state any money you or your spouse have in bank accounts or in any other financial institution.

Financial Institution Type of Account		Amount you have	Amount your spouse has	
		s ()	\$ <i>O</i>	
		\$	\$	
		\$ \(\triangle \)	s V	

If you are a prisoner seeking to appeal a judgment in a civil action or proceeding, you must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

5. List the assets, and their values, which you own or your spouse owns. Do not list clothing and ordinary household furnishings.

Home	Other real estate	Motor vehicle #1 Siezed.
(Value) \$	(Value) \$	(Value) \$
		Make and year:
		Model:
		Registration #:

Motor vehicle #2 5 (eze).	Other assets	Other assets
(Value) \$	(Value)\$	(Value) \$
Make and year:		
Model:		
Registration #:		

6. State every person, business, or organization owing you or your spouse money, and the amount owed.

Person owing you or your spouse money	Amount owed to you	Amount owed to your spouse
	\$	\$
	\$	\$
	\$	\$
	\$	\$

7. State the persons who rely on you or your spouse for support. None

Name [or, if under 18, initials only]	Relationship	Age
400000000000000000000000000000000000000		

8. Estimate the average monthly expenses of you and your family. Show separately the amounts paid by your spouse. Adjust any payments that are made weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate.

	You	Your Spouse
Rent or home-mortgage payment (including lot rented for mobile home) Are real estate taxes included?	\$	\$
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$	\$
Home maintenance (repairs and upkeep)	\$	\$
Food	\$	\$
Clothing	\$	\$
Laundry and dry-cleaning	\$	\$
Medical and dental expenses	\$	\$
Transportation (not including motor vehicle payments)	\$	\$
Recreation, entertainment, newspapers, magazines, etc.	\$	\$
Insurance (not deducted from wages or included in mortgage pa	yments)	white the same of
Homeowner's or renter's:	\$	\$
Life:	\$	\$
Health:	\$	\$
Motor vehicle:	\$	\$
Other:	\$	\$
Taxes (not deducted from wages or included in mortgage payments) (specify):	\$	\$
Installment payments	Angellan P 1/AZZ	
Motor Vehicle:	\$	\$ see
Credit card (name):	\$	\$
Department store (name):	\$, \	\$
Other:	\$	<u> </u>

Alimony, maintenance, and support paid to others	\$		\$ 0		
Regular expenses for operation of business, professio farm (attach detailed statement)	on, or \$	Opposite the state of the state	\$		
Other (specify):	\$		\$ \$		
Total monthly expenses:	\$ 2,	60	\$		
9. Do you expect any major changes to your mon liabilities during the next 12 months?	CM EVE- Mor athly income or	myary 4th by expenses	frends and or in your assets	family.	
Yes No If yes, describe on an a	attached sheet.				
10. Have you spent - or will you be spending - any connection with this lawsuit? Yes No	y money for exp	oenses or a	attorney fees in		
If yes, how much? \$					
11. Provide any other information that will help e for your appeal. Everything I had we case, whatever money I had withing and hired one in hew york, nothing have nothing in my bank but 12. State the city and state of your legal residence.	left und Spending williams etc. a	cannot po l 14 C wed 1 total	ay the docket feed onnection I on legal 300 K all ed.	s to this fees I nuch wall	hivec hac
Your daytime phone number: n Jay					

Your age: 3\ Your years of schooling: